

BUSINESS LICENSE COMMISSION

COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET LOS ANGELES, CA 90012 (213) 974-7691

www.board.co.la.ca.us/blc



MEMBERS
STEVEN AFRIAT
PRESIDENT
RENÉE CAMPBELL
VICE-PRESIDENT
SARA VASQUEZ
SECRETARY
JAMES BARGER
COMMISSIONER
SHAN LEE
COMMISSIONER

March 31, 2014

Carla Hunt Smallwood Dance Studio 84

HEARING ON APPLICATION FOR ANNUAL DANCE/SC BUSINESS LICENSE ID #140917

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday**, **April 9, 2014** at **9:00 a.m**. in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either a professional/certified interpreter or other person who is <u>fluent</u> in both English and your native language. If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.

Sincerely,

STEVEN AFRIAT President

Lupe Duron Commission Staff

NOTICE TO PRINTER STATE LAW REQUIRES THAT THIS LEGAL ADVERTISEMENT SHALL BE SET IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE: Z 91085

NEWSPAPER:....NEWHALL SIGNAL

PUBLISH 3 TIMES

1 ST	PUBLISHING DATE:	03/13/2014
2 ND	PUBLISHING DATE:	03/20/2014
3 RD	PUBLISHING DATE:	03/27/2014

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

ANNUAL DANCE/SC

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:	27889 SMYTH DR
	VALENCIA CA 01355
NAME OF APPLICANT:	DANCE STUDIO 84 / CARLA HUNT
	SMALLWOOD
	DANCE STUDIO 84
DATE OF HEARING:	
TIME OF HEARING:	09:00 A.M.

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION 500 W. TEMPLE STREET, RM 374 LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR BUSINESS LICENSE SECTION 225 N. HILL STREET RM. 109 LOS ANGELES, CA 90012





225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012

BUSINESS LICENSE APPLICATION REFERRAL SUMMARY SHEET

ADDRESS OF BUSINESS: 27889 SMYTH DR, VALENCIA, CA 91355
TELEPHONE: (661) 775-7655
OWNER OF BUSINESS: CARLA HUNT SMALLWOOD
CAL. DR. LIC.#:
NAME OF PERSON FINGERPRINTED:

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

FICTITIOUS NAME: DANCE STUDIO 84

KIND OF BUSINESS: ANNUAL DANCE /SC

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

			APPROVED	<u>DATE</u>	SIGNATURE
	1.	Animal Care & Control		 	
	2.	Risk Management			·
X	3.	Building & Safety	YES	11/26/13	dmiles
X	4.	Fire Department	YES	02/24/14	dmiles
	5.	Public Health			
X	6.	Treasurer & Tax Collector	YES	01/31/14	dmiles
X	7.	Business License Commission			
	8.	Sheriff Department	· · · · · · · · · · · · · · · · · · ·		
X	9.	Regional Planning Commission	YES	11/07/13	dmiles
	10	. Weights and Measures			
X	11.	. Publishing	YES	03/13/14	dmiles
	12	. Public Works - EPD			
X	13	. Sheriff Fingerprint	YES	01/03/14	tchen

Conditions:



Application taken by: ________

Los Angeles County Treasurer and Tax Collector

Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ 1,708 ()()				ID#	10917
	BU	SINESS INFORM	ATION		0126
Type of Business:		Address of Business:	-	Smuth Dr. Vai	Uncia (A
Dance		Business Telephone:	Katenii	9661-775-6	1655
DBA (Business Name):		Mailing Address:			
Dance Studio &	34				
Sellers Permit # (State Board of Eq	ualization): Q	9-83332	3		
Business Ownership Structure: If LLC or Corporation, the informat	Single C ion below is requi	Owner Partnership red:	o rrc c	Corporation	
Date of Incorporation:		Incorporated in the S	tate of:		
Exact Corporate Name:					
Names of Officers		Addresses		Titles	
Applicant's Full Name: CMM Home Address: Home Telephone:		LICANT INFORM	Email address:		
		•	_ ds&	84clao1.ca	m
Social Security #:	Date of Birth:	1 1	Place of Birth		, , , , , , , , , , , , , , , , , , ,
Driver's License or State ID#: Male Female Height	u We	ight Hai	Expiration Date:	Lye Color	
The information contained herein is license applied for, I agree to submiticense in accordance with regulation used in connection therewith in con	true and correct t any additional i ns established fo formance with all	to the best of my knov nformation that may k r such business and to I applicable laws, ordin	vledge and belief. be required, to con maintain all truck nances and regula	As a condition of the iss duct all phases of this bu s and/or equipment that tions.	isiness may be
Date: 11/6/13	Applicant's	Signature: / */	Ille	Langelly 1	

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE /SC

BASIC LICENSE NO. 8298

ADDRESS OF BUSINESS: 27889 SMYTH DR, VALENCI	A, CA 91355
TELEPHONE: (661) 775-7655	
OWNER OF BUSINESS: CARLA HUNT SMALLWOOD	
CAL. DR. LIC.#:	
NAME OF PERSON FINGERPRINTED:	
FICTITIOUS NAME: DANCE STUDIO 84	
MAILING ADDRESS:	
DATE THAT YOU STARTED BUSINESS:	
PREVIOUS OWNER'S NAME, IF KNOWN:	
THIS IS AN APPLICATION FOR: NEW LICENSE	
BUILDING & SANTA CLA	
APPROVAL	DENIAL
RECOMMENDATION:	
SIGNATURE: COMMITTEE	DATE: //-2/-/3

DATE 11/07/13

IDENTIFICATION NUMBER 140917

B002/003

Feb-08-2014 05:88pm From-LACOFD FIRE MARSHAL

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T-832 P.010/010 F-162



COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE NO	٠٠.
ADDRESS OF BUSINESS: 27889 SMYTH DR, VALENCIA, CA 91355	· · ·
TELEPHONE: (661) 7757665	
OWNER OF BUSINESS: CARLA HUNT SMALLWOOD	
CAL. DR. LIC#;	
NAME OF PERSON FINGERPRINTED:	
FICTITIOUS NAME: DANCE STUDIO 84	
MAILING ADDRESS:	
DATETHAT YOU STARTED HUSINESS:	·
Previous owner's name, if known:	
THIS IS AN APPLICATION FOR: NEW LICENSE	•
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FIRE DEPARTMENT LA COUNTY

RECOMMENDATION: RECOMMENDATION:	ES	☐ DENIAL	
SIGNATURE: Ja alla CAPT HURI WE BASIC LICENSE NO. 8298	•	DATE: 2/20/14/	THE STATE OF THE S
	DATE 01/31/14	identification number	R 140917

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE /SC
ADDRESS OF BUSINESS: 27889 SMYTH DR, VALENCIA, CA 91355
TELEPHONE: (661) 775-7655
OWNER OF BUSINESS: CARLA HUNT SMALLWOOD
CAL. DR. LIC.#:
NAME OF PERSON FINGERPRINTED:
FICTITIOUS NAME: DANCE STUDIO 84
MAILING ADDRESS:
DATE THAT YOU STARTED BUSINESS:
PREVIOUS OWNER'S NAME, IF KNOWN:
THIS IS AN APPLICATION FOR: NEW LICENSE
TREASURER & TAX COLLECTOR
LA COUNTY
APPROVAL DENIAL
RECOMMENDATION:
SIGNATURE: 1-29-14

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINES	SS: 27889 SMYTH DR ,	VALENCIA,	CA 91355	
TELEPHONE: (661) 775	5-7655			
OWNER OF BUSINESS	CARLA HUNT SMAI	LLWOOD		
CAL. DR. LIC.#:	•			
NAME OF PERSON FIN	GERPRINTED:			
FICTITIOUS NAME: D	ANCE STUDIO 84			
MAILING ADDRESS:				
DATE THAT YOU STA	RTED BUSINESS:			
PREVIOUS OWNER'S N	IAME, IF KNOWN:			
THIS IS AN APPLICAT	ION FOR: NEW LICENS	SE		
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				:
	APPROVAL	•	☐ DENIAL	
			•	
RECOMMENDATION:				
		President St.		A
SIGNATURE:	Ar		DATE: 11/7/13	
BASIC LICENSE NO. 829	B DATE	11/07/13	IDENTIFICATION NU	JMBER 140917

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE APPLICATION REFERRAL

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 27889 SMYTH DR, VALENCIA, CA 91355

TELEPHONE: (661) 775-7655

OWNER OF BUSINESS: CARLA HUNT SMALLWOOD

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: DANCE STUDIO 84

MAILING ADDRESS: :

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT
LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION:

APPROVED

SIGNATURE:

Wp

53 www 0

DATE: 12 (31 (3

BASIC LICENSE NO. 8298

DATE 11/07/13

DENTIFICATION NUMBER 140917